

REQUIRES MONITORING
OR STAFF ACTION _____

COMMISSION DIRECTIVE

ADMINISTRATIVE MATTERS	<input type="checkbox"/>	DATE	<u>September 7, 2005</u>
MOTOR CARRIER MATTERS	<input type="checkbox"/>	DOCKET NO.	<u>2005-75-C - -</u>
UTILITIES MATTERS	<input checked="" type="checkbox"/>		_____

SUBJECT:

DOCKET NO. 2005-75-C: Matrix Telecom, Incorporated and Global Crossing Telecommunications, Incorporated, Global Crossing Local Services, Incorporated and Global Crossing Telemanagement, Incorporated – Joint Application for Expedited Approval of a Transfer of Certain Assets and a Waiver of Applicable Anti-Slamming Regulations. Verified Testimony of Dennis Smith on Behalf of Matrix Telecom, Incorporated has been Received. Discuss with the Commission a Motion for Expedited Review Filed by Bonnie D. Shealy, Esquire, on Behalf of Matrix Telecom, Incorporated.

COMMISSION ACTION:

Move that the Commission grant the joint application for Expedited Review and approve the transfer of certain assets from Global Crossing Telecommunications, Global Crossing Local services, and Global Crossing Telemanagement to Matrix Telecom. I also move that applicable anti-slamming regulations be waived. As pointed out in their application, this transaction will affect only business customers with whom Global Crossing has individual contracts; no residential customers will be affected.

PRESIDING	<u>Mitchell</u>	Session:	Regular
		Time of Session	<u>2:30 PM</u>
	MOTION	YES	NO
			OTHER

CLYBURN	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	APPROVED _____
FLEMING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPROVED STC 30 DAYS _____
HAMILTON	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ACCEPTED FOR FILING _____
HOWARD	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	DENIED _____
MITCHELL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	AMENDED _____
MOSELEY	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	TRANSFERRED _____
WRIGHT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	SUSPENDED _____
				CANCELED _____
				SET FOR HEARING _____
				ADVISED _____
				CARRIED OVER _____
				RECORDED BY <u>SCHMIEDING</u>